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to the contention that mental disorders are not bona fide diseases and to the claim that imprisonment for insanity, as opposed to law breaking, is incompatible with the moral principles of a free society?

First, some critics say that what we now call mental diseases may yet be shown to be "caused," at least in some cases, by subtle pathophysiological processes in the body — in particular, by disorders in the molecular chemistry of the brain — that we do not yet know how to measure or record. Nevertheless, they claim, these processes, like those responsible for the psychoses associated with paresis or pellagra, exist, and it is only because of the present state of our knowledge, or rather ignorance, that we cannot yet properly diagnose them. But such an advance in the science and technology of medical diagnosis would only add to the list of literal diseases and would not in the slightest impair the validity of my argument that when we call certain kinds of disapproved behaviors mental diseases we create a category of metaphorical diseases. This type of objection to my views, which actually represents just another instance of biological reductionism, misses the point I try to make: to uphold it would be like upholding the view that because certain canvasses thought to be forged Renoirs or Cezannes prove to be genuine on closer study, all forged masterpieces are genuine. If there are real or literal diseases, there must also be, the world being as it is, others that are fake or metaphorical.

Second, although other critics agree that mental illnesses are unlike bodily illnesses and agree that involuntary hospitalization and treatment is not any more justified for so-called mental illness than it is for bodily illness, they hold that the term *mental illness* often designates a phenomenologically identifiable and hence valid category of conduct. But I do not deny this. I have never maintained that the conduct of a depressed or elated person is the same as that of a person who is contented and even tempered; or that the conduct of a person who claims to be Jesus or Napoleon is the same as that of another who makes no such false claims. I have objected to psychiatric diagnostic terms not because they are meaningless but because they are used to stigmatize,

dehumanize, imprison, and torture those to whom they are applied. To put it somewhat differently, I oppose involuntary psychiatry or the rape of the patient by the psychiatrist, but I do not oppose voluntary psychiatry or psychiatric activities between consenting adults.

Third, some of my non-American critics concede that I am right about everything I say about American psychiatry but claim that things are "much better" in their country. My own experience and knowledge of psychiatry in the Western world — which by now is quite extensive — tells me that this is not so. To be sure, there are important differences in national styles in the way people treat each other, and these are reflected in the ways legislators, judges, and psychiatrists treat those accused of mental illness. But, allowing for these differences, the institutional psychiatric systems of various contemporary societies are more remarkable for their similarities than for their differences.

### Coercive Psychiatry Undermines Liberty and Dignity

The idea that a person accused of crime is innocent until proved guilty is not shared by people everywhere but is, as I need hardly belabor, characteristically English in its historical origin and singularly Anglo-American in its consistent social application. And so is its corollary, namely that an individual has an inalienable right to personal liberty unless he has been duly convicted in court of an offense punishable by imprisonment. Because this magnificent edifice of dignity and liberty has been undermined and continues to be undermined by psychiatry, the abolition of involuntary psychiatric interventions is an especially important link in the chain that could restrain this mortal enemy of individualism and self-determination.

I hope people eventually will be able to discriminate between two types of physicians: those who heal, not so much because they are saints, but because that is their job; and those who harm, not so much because they are sinners, but because that is their job. And if some doctors harm — torture rather than treat, murder the soul rather than minister to the body — that is, in part, because society, through the state, asks them and pays them to do so. We saw it happen in Nazi Germany, and we hanged many of the doctors. We see it happen in the Soviet Union, and we denounce the doctors with righteous indignation.

But when will we see that the same things are happening in the so-called free societies? When will we recognize and publicly identify the medical criminals among us? Or is the very possibility of perceiving many of our leading psychiatrists and psychiatric institutions in this way precluded by the fact that they represent the officially "correct" views and practices? Is it precluded because they have the ears of our lawyers and legislators, journalists and judges? Or is it precluded because they control the vast funds, collected by the state through taxing the citizens, which finance an enterprise whose basic moral legitimacy we should call into question? ▲